PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

	Docket Number (Optional) 032087/1010

In re Application of Goldman et al.

Application Number 10/684,226	Filed October 10, 2003

For METHODS FOR TREATING DENTAL CONDITIONS USING TISSUE SCAFFOLDS

Group Art Unit 3732	Examiner Cary E. O'Connor

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows (check time period desired):

☐ One month (37 CFR 1.17(a)(1)) - ($60/$120) $_____

☐ Two months (37 CFR 1.17(a)(2)) - ($225/$450) $_____

☒ Three months (37 CFR 1.17(a)(3)) - ($510/$1020) $__510.00__

☐ Four months (37 CFR 1.17(a)(4)) - ($795/$1590) $_____

☐ Five months (37 CFR 1.17(a)(5)) - ($1080/$2160) $_____

☒ Applicant claims small entity status.

☒ A check to cover the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number 14-1138 .
I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor

     ☐ assignee of record of the entire interest. See 37 CFR 3.71.
         Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

     ☒ attorney or agent of record.

     ☐ attorney or agent under 37 CFR 1.34(a).
         Registration number if acting under 37 CFR 1.34(a) _____.

_____(signature)_____	July 19, 2006
Signature	Date
Michael L. Goldman	(585) 263-1304
Typed or printed name	Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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